

Self Assessment on Drug Court Key Components

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Session Objectives

- Learn how to use the self assessment effectively
- Identify particular areas of strengths and weakness as reflected by the scoring on drug court self-assessment tool
- Develop alternatives that address weaknesses by brain storming with group

Self-Assessment Identified Strengths

- Using the buttons on your responder which key component (1-10) do you think is the true strength of your program

Key Components

1. Integration of treatment and case processing
2. Non- adversarial process
3. Early Identification and entry
4. Treatment Continuum available
5. Regular and random drug testing
6. Coordinated Strategy Response
7. Court/Participant Interaction
8. Program Monitoring and Evaluation
9. Multi-disciplinary training
10. Drug Court Forges Partnerships

Self-Assessment Identified Strengths

6. Coordinated Response

4.50 (2005)

4.17 (2004)

4.62 (2003)

Self-Assessment Identified Strengths

- Using the buttons on your responder which key component (1-10) do you think is the second major strength of your program

Key Components

1. Integration of treatment and case processing
2. Non- adversarial process
3. Early Identification and entry
4. Treatment Continuum available
5. Regular and random drug testing
6. Coordinated Strategy Response
7. Court/Participant Interaction
8. Program Monitoring and Evaluation
9. Multi-disciplinary training
10. Drug Court Forges Partnerships

Self-Assessment Identified Strengths

7. Court/Participant Interaction

4.49 (2005)

4.16 (2004)

4.51 (2003)

Self-Assessment Identified Weakness

- Using the buttons on your responder which Key Component (1-10) do you think is the weakest in your program

Key Components

1. Integration of treatment and case processing
2. Non- adversarial process
3. Early Identification and entry
4. Treatment Continuum available
5. Regular and random drug testing
6. Coordinated Strategy Response
7. Court/Participant Interaction
8. Program Monitoring and Evaluation
9. Multi-disciplinary training
10. Drug Court Forges Partnerships

Key Components

10. Drug Court Forges Partnerships

3.01 (2005)

3.02 (2004)

3.14 (2003)

Self-Assessment Identified Weakness

- Using the buttons on your responder which Key Component (1-10) do you think is the second weakest in your program

Key Components

1. Integration of treatment and case processing
2. Non- adversarial process
3. Early Identification and entry
4. Treatment Continuum available
5. Regular and random drug testing
6. Coordinated Strategy Response
7. Court/Participant Interaction
8. Program Monitoring and Evaluation
9. Multi-disciplinary training
10. Drug Court Forges Partnerships

Key Components

9. Multi-disciplinary training

3.35 (2005)

3.36 (2004)

3.57 (2003)

8. Program Monitoring/ Evaluation

3.52 (2005)

3.77 (2004)

3.44 (2003)

Identified Weakness Targeting Benchmarks

- Using your responder system, identify the benchmark (A through E) that you think is the most problematic under the selected Key Component #10 –Forging Partnerships
- Action Planning—how can we strengthen that benchmark

KEY COMPONENT #10

Forging partnerships among drug courts, public agencies, and community-based organizations generates local support and enhances drug court effectiveness

- A. The drug court has appropriate linkages with the law enforcement community to provide support for and monitoring of participants.
- B. Representatives from the court, community, treatment, health, and criminal justice agencies meet regularly to provide direction to the drug court program.
- C. The drug court has a professional staff that reflects the diversity of the population served.
- D. The drug court has a press briefing book and provides opportunities for community involvement through forums and informational meetings.
- E. Participation of public and private agencies and community organizations is formalized through a steering committee.

ACTION PLAN
BRAIN STORMING MATRIX
preferred situation

Possible Goals	Possible Changes	Best Fits (Changes meeting goals)

ACTION PLANNING WORKSHEET

ISSUE TO SUB-GOAL

• Opportunity Issue No. _____:

• Goal (SMART): We will (establish, create, begin, increase, decrease)

• _____ by _____
(date)

• We will know we have succeeded because (form of measurement):

• Sub-goals:

• 1.

• 2.

• 3.

• 4.

• Remember, goals and sub-goals should be SMART; Specific, Measurable, Agreed upon, Realistic, and Time framed.

WORKING ACTION PLAN

Goal Statement	Sub-goals	Actions	Person Responsible	Date Completed
Example: By (date), we will improve communication with the police department	Draft information sheet to go to the police	1. Find out information needed 2.Contact PD re: availability 3.	Tom Jim Sally	7-1-07 7-17-07

Identified Weakness Targeting Benchmarks

- Using your responder system, identify the benchmark (A through F) that you think is the most problematic under the selected Key Component #9---Interdisciplinary Training
- Action Planning—how can we strengthen that benchmark

KEY COMPONENT #9

Continued interdisciplinary education promotes effective drug court planning, implementation, and operations

- A. Key personnel have participated in training on the written operating procedures of the drug court.
- B. Multi-disciplinary training is routine for new personnel and ongoing.
- C. The judge, public defender, prosecutor, probation, and assigned law enforcement staff have undergone training in addiction and substance abuse treatment.
- D. Team-building is part of the regular training process.
- E. All personnel, including the Drug Court Coordinating Committee, have undergone training on diversity.
- F. The drug court has an educational curriculum that is updated to provide for advances and needs.

ACTION PLAN
BRAIN STORMING MATRIX
preferred situation

Possible Goals	Possible Changes	Best Fits (Changes meeting goals)

ACTION PLANNING WORKSHEET

ISSUE TO SUB-GOAL

• Opportunity Issue No. _____:

• Goal (SMART): We will (establish, create, begin, increase, decrease)

• _____ by _____
(date)

• We will know we have succeeded because (form of measurement):

• Sub-goals:

• 1.

• 2.

• 3.

• 4.

• Remember, goals and sub-goals should be SMART; Specific, Measurable, Agreed upon, Realistic, and Time framed.

WORKING ACTION PLAN

Goal Statement	Sub-goals	Actions	Person Responsible	Date Completed
Example: By (date), we Improve our team morale and trust	Improve communication	1. Contact team builder 2. Check team member availability for retreat 3. Secure funds for Hawaii retreat	Tom Jim Sally	6/1 7/1 first

Key Components

1. Integration of treatment 4.01 (4.17)
2. Non- adversarial 3.92 (3.86)
3. Early Identification 3.93 (3.91)
4. Treatment Continuum 3.92 (4.05)
5. Regular and random
6. Coordinated Response 4.51(4.62)
7. Court/Participant Interaction 4.52 (4.51)
8. Program Monitoring/ Evaluation 3.77 (3.45)
9. Multi-disciplinary training 3.36 (3.56)
10. Drug Court Forges Partnerships 3.02 (3.14)

END

KEY COMPONENT #8

Monitoring and evaluation measure the achievement of program goals and gauge effectiveness

- A. Monitoring and evaluation processes began at planning stage and are ongoing.
- B. Monitoring and management data is assembled in a useful format for regular review by program leaders, managers, and evaluators.
- C. Program managers and leaders periodically review monitoring and management data to analyze program effectiveness, modify operations, and refine goals.
- D. Written guidelines exist and are followed to protect confidentiality and unauthorized disclosure of personal information.
- E. A non-independent evaluator or independent evaluator has been selected and an evaluation is in progress.

KEY COMPONENT #1

Drug courts integrate alcohol and other drug treatment service with justice system case processing

- A. Initial and ongoing planning is carried out by a broad-based group that meets regularly
- B. Court and treatment providers maintain ongoing communication about general problems that arise.
- C. The drug court's mission goals, eligibility criteria, operating procedures, and performance measures are collaboratively developed and defined.
- D. Documents exist that detail drug court's mission, goals, eligibility criteria, operating procedures, and performance measures.
- E. Mechanisms exist for shared decision-making and conflict resolution among drug court team members

KEY COMPONENT #2

Using a non-adversarial approach, prosecution and defense counsel promote public safety while protecting participants' due process rights

- A. Prosecutors, defense counsel, and judge are assigned to drug court for sufficient time to insure team-building, stability, and consistency
- B. Prosecutors and defense counsel participate in program design, eligibility criteria, and case processing policies and procedures.
- C. Prosecutors and defense counsel have a memorandum of understanding regarding defendants' admissions of AOD use during court reviews.
- D. Defense counsel explains to defendant the drug court concept and procedures and advises client of alternative courses of action, including treatment and benefits of sobriety.
- E. Prosecuting attorney promptly determines eligibility and participates in a coordinated strategy for responding to AOD

KEY COMPONENT #3

Eligible participants are identified early and promptly placed in the drug court program

- A. Eligibility screening is based upon written criteria and criminal justice personnel screen cases for referral.
- B. Eligible participants are promptly advised about program requirements and merits of participating.
- C. Trained professionals screen eligible drug court individuals for AOD problems and treatment suitability.
- D. D. Initial appearance before drug court judge occurs immediately after arrest or apprehension.
- E. The court requires that eligible participants

KEY COMPONENT #4

Drug courts provide access to a continuum of alcohol, drug, and other related treatment and rehabilitative services

- A. Individuals are initially screened and periodically assessed to insure proper offender/treatment matching.
- B. Treatment services are comprehensive, including detox, education, outpatient, intensive outpatient, inpatient, therapeutic communities, etc.
- C. Treatment designs and delivery systems are sensitive and relevant to issues of race, culture, religion, gender, age, ethnicity, and sexual orientation.
- D. Referral to auxiliary services (i.e., housing, vocational and educational training, social services, job placement, etc.), and special services (i.e., mental health, prenatal care, etc.), are available.
- E. Funding for treatment is adequate, stable, and dedicated to drug court.

KEY COMPONENT #5

Abstinence is monitored by frequent alcohol and other drug testing

- A. AOD testing policies and procedures are based on established guidelines, such as APPA.
- B. Random testing of not less than two per week initially, decreasing with abstinence.
- C. Scope of testing is sufficiently broad to detect drugs of abuse, including alcohol.
- D. Recognized standard collection and testing procedures are followed to insure high reliability of results.

E. Continued immediate notification of

KEY COMPONENT #6

A coordinated strategy governs drug court responses to participants' compliance

- A. The drug court team maintains frequent, regular communication to provide timely reporting of progress and non-compliance enabling the court to respond immediately.
- B. Sanctions are developed jointly and are imposed after consultation with team members.
- C. Imposed sanctions are graduated and commensurate with infraction.
- D. Compliance with program requirements is rewarded.
- E. Consequences for program compliance/non-compliance are clearly explained to participant before enrollment so participant has clear expectations.

KEY COMPONENT #7

Ongoing judicial interaction with each drug court participant is essential

- A. Regular status conferences are used to monitor participant performance.
- B. Interval between status conferences is varied according to treatment protocols and participant progress.
- C. Court-participant interaction demonstrates to participant observers the benefits of program compliance and consequences for non-compliance.
- D. The court applies appropriate sanctions and incentives to match participant treatment progress.
- E. Program graduation is recognized as a significant achievement.

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- E. Participation of public and private agencies and community organizations is formalized through a steering committee.